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NO. 6780 P. 1

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FAX TRANSMISSION

DATE: May 15, 2007

PTO IDENTIFIER: Application Number 10/623,733-Conf. #6069
Patent Number
Inventor: William E. Fristad et al.

MESSAGE TO: US Patent and Trademark Office

FAX NUMBER: (571) 273-8300

FROM: CONNOLLY BOVE LODGE & HUTZ LLP

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Attorney Dkt. #: 00155-00388-US

PAGES (Including Cover Sheet): 8

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Fee Transmittal (1 page)
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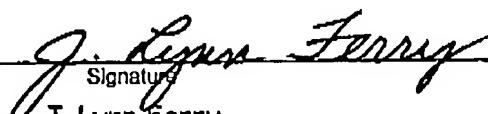
Application No. (if known): 10/623,733

Attorney Docket No.: 00155-00388-US

Certificate of Transmission under 37 CFR 1.8

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MAY 15 2007

NO. 6780 P. 3

PTO/SB/17 (07-08)

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U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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Effective on 12/08/2004.
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

FEE TRANSMITTAL For FY 2007

Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$ 1,650.00)

Complete If Known

Application Number	10/623,733-Conf. #6089
Filing Date	July 22, 2003
First Named Inventor	William E. Fristad
Examiner Name	A. J. Green
Art Unit	1755
Attorney Docket No.	00155-00388-US

METHOD OF PAYMENT (check all that apply)

Check Credit Card Money Order None Other (please identify): _____
 Deposit Account Deposit Account Number: 03-2775 Deposit Account Name: Connolly Bove Lodge & Hutz LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee
 Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 Credit any overpayments

FEE CALCULATION**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

<u>Application Type</u>	<u>FILING FEES</u>		<u>SEARCH FEES</u>		<u>EXAMINATION FEES</u>		<u>Fees Paid (\$)</u>
	<u>Fee (\$)</u>	<u>Small Entity Fee (\$)</u>	<u>Fee (\$)</u>	<u>Small Entity Fee (\$)</u>	<u>Fee (\$)</u>	<u>Small Entity Fee (\$)</u>	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

2. EXCESS CLAIM FEESFee Description

Each claim over 20 (including Reissues)	<u>Fee (\$)</u>	<u>Small Entity Fee (\$)</u>
Each independent claim over 3 (including Reissues)		50 25
Multiplic dependent claims		200 100

<u>Total Claims</u>	<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>
- 20 =	x	=	

HP = highest number of total claims paid for, if greater than 20.

<u>Indep. Claims</u>	<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>
- 3 =	x	=	

HP = highest number of independent claims paid for, if greater than 3.

<u>Multiple Dependent Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>
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<u>Total Sheets</u>	<u>Extra Sheets</u>	<u>Number of each additional 50 or fraction thereof</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>
- 100 =	/50 =	(round up to a whole number) x		

4. OTHER FEE(S)		<u>Fees Paid (\$)</u>
Non-English Specification	\$130 fee (no small entity discount)	130.00
Other (e.g., late filing surcharge):	1814 Statutory Disclaimer 1401 Notice of appeal 1253 Extension for response within third month	500.00 1,020.00

SUBMITTED BY		<u>Registration No.</u>	<u>Telephone</u>
Signature		42,518	(302) 658-9141
Name (Print/Type)	Aaron R. Ettelman	Date	May 15, 2007

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